

State Form 4606 (R9 /11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse

IS THIS AN AMENDMENT? X Yes No

### (CFA-4) Summary Sheet

PR PER		RENUR	BIER	
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TOTAL	PAGE	FIN ENT	RECEA	4 REPORT
	1	4		

COMMITTEE INFORT	WATION	· 公司等 · 通过 · 通	<b>1984</b>
Full name of committee (as on Statement of Organization)  Check if this is a new name			
STEVE DILLINGER ELECTION COMMITTEE			
2. Acronym or abbreviated name, if any	3. Committee tei	ephone number	
N/A	317	574-0700	
	eck if this is a new	address	
9247 N. Meridian St. Suite 200			
5. City, state, ZIP code	6. Party sifiliatio	n (if applicable)	
Indianapolis, In	REPU	BLICAN	
CANDIDATE INFORMATION (For Cand	lidate's Commit	tees Only)	
7. Full name of candidate (include any nickname)	3. Parry affiliatio	n or if independent	
Steven C. Dillinger	Repui	blican	
9. Office sought (Include district number, if any, Not required for exploratory committee.)	10. County of re	sicence	
Hamilton County Commissioner	Hami		
TYPE OF REPORT	0,5 10 11 20 1150	CONVENTIO	ON CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Re-Election Annual Final / Dispands Committee (lines 13, 19, 2)	nd 20 must se 127	Pre-Convent	on
Outgoing Treasurer (within 10 days amend Statement of Organization)		Post-Canven	
12. Reporting period:		COLUMN A	COLUMNE
From: April 8, 2000 Through: October 13, 13. Cash on hand and investments at the beginning of this reporting period.	2000	This Period	Year to Date
		50,544.50	
14. Cash on hand and investments January 1, current year.			29,080,52
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions	ributions.	18,645.00	
15a. Itemized (use Schedule A)	-	2,350.00	59,220.00
15b. Unitemized	-		4,325
15c. Add lines 15a, and 15b in both columns	SUBTOTAL _	20,995.00	63,545.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	71,539.50	92,625.52
(Note: These amounts include in-king expenditures and loan repayments.)			
		53,009,64	74.095.66
17a. Itemized (use Schedule 3) (Public Question: use Schedule C)	-	0	/4,095.66
17b. Unitemized	-	53,009.64	74 005 66
17c. Add lines 17a and 17b in both columns	SUBTOTAL _	18,529.86	74,095.66
18. Cash on hand and investments at close of this reporting period (subtract 17c from 18 in both of	olumns) TOTAL_	10,323.00	18,529.86
19. Debts OWED BY the committee (use Schedule D)		0	
20. Decis OWED TO the committee fuse Schedule E)	1	0	

		CERTIFICATION		0.00
I CERTIFY THAT I HAVE E	XAMINED THIS STAT	EMENT, TO THE BES	T OF MY KNOWLEDGE	AND BELIEF IT IS

Signature on File

FOR OFFICE USE ONLY

(IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Falony. (IC 3-1-1-13) A person who knowingly files a fraudulent report commits a Class D Falony. (IC 3-1-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class 5 Miscamaanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-18, 3-9-4-17, 3-9-4-18.)





State Form 4806 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

ISTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDMDUALS ON THIS SCHEDULE. Please type or print legibly I BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse de. This schedule is used to document contributions and receipts totaled on ITEM15a of the Summary Sheet. It cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be emized on this schedule (over \$200, if regular parry committee). All cumulative receipts, (such as loan proceeds not repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER 100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during ne calendar year. Otherwise, this is optional.

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Page 1	of	2

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED BY
MICHAEL BROWNING 251 N. ILLINOIS ST. STE 200 INDIANAPOLIS, IN 46204	Contributions:  XXDIrect In-Kind (describe)	1;000:00	\$1,000.00	4-14-00
	Other Receiots:			Trēāŝurė
Contributor's Occupation (if required)		_!		
PAT & RICHARD WEAVER 21450 OAKVIEW DRIVE NOBLESVILLE, IN 46060	Contributions: XXQ(rect in-Kind (describe)	\$250.00	\$250.00	4-21-00
Contributor's Occupation (f required)	Other Receiots:  Interest Loan Misc (specify)			Treasure
3.	Contributions:		1	1
NORMAN WILKINS 2714 KNOLLWOOD DRIVE INDIANAPOLIS, IN 46208	À Ökreci ☐ In-Kind (describe)	\$150.00	\$150.00	4-11-00
	Other Receiots:  Interest I Loan  Misc (specify)			reasurer
Contributor's Occupation (if requires)		-		
JAMES C. FEHSENFIELD 8001 SPRINGMILL ROAD INDIANAPOLIS, IN	Contributions:  (1) Officet  (ii) -Kind (describe)	\$200.00	\$200.00	4-20-00
Contributor's Occupation (if required)	Other Receipts:  Interest I Loan Misc (specify)	,		Treasure
5.		-	1	-
BRIAN GLAZE SOUTH BEND, IN	Contributions:  X Virect  If In-Kind (describe)			4-27-00
Contributor's Occupation (f required)	Other Receipts: Interest © Loan Misc (specify)	\$950.00	\$950.00	Treasure
		-	Note the second	The Control of the Co
SUB TO	TAL THIS PAGE OF SCHEDULE A	\$2,550.00		
TOTAL OF ALL PAGES OF SCHED (Enter total on ITEM 15a of the Sur		3		



State Form 4806 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

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	FI	LE NUMBER
Page _	2	of2

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
ROBERT T. KIRKLEY 389 LARIMAR TRAK	Contributions:  XXXDirect  In-Kind (describe)	\$950.00	\$950.00	4-27-00
VALPARAISO, IN 46383  Contributor's Occupation (if required)	Other Receiots:			Treasure
				-
MICHAEL & VICKI KEEVEN 9940 SOUTHWIND DRIVE INDIANAPOLIS, IN 46266	Contributions: XM Ofrect In-Kind (describe)	\$950.00	\$950.00	4-27-00
Contributor's Occupation (firequired)	Other Receipts:			Tréasure
				-
TOM HOSTON 4450 N. WASHINGTON BLVD. INDIANAPOLIS, IN 46205	Contributions:  (X) (X) (rect  (In-Kind (describe)	\$500.00	\$500.00	5-23-00
	Other Receipts:  Interest Ucan Misc (specify)			Treasure
Contributor's Occupation (f required)	_	-		
GEORGE SWEET 12722 HAMILTON CROSSING BEVD. CARMEL, IN 46032	Contributions: XM Afrect in-Kind (describe)	\$500.00	\$500.00	5-23-00
Contributor's Occupation (frequired)	Other Receipts: ☐ Interest ☐ Loan ☐ Misc (specify)			Treasure
5.	Contributions:	1	1	
WILLIS R. CONNER 4165 Millersville Road Indianapolis, IN 46205		\$950.00	\$950.00	4-27-00
Contributor's Occupation (if required)	Other Receipts:  Interest Cloan Misc (specify)			Treasurer
		-		
SUB TOTA	AL THIS PAGE OF SCHEDULE A	\$3850.00		
TOTAL OF ALL PAGES OF SCHEDUL	LE A ON THE LAST PAGE ONLY			



State Form 4608 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

ITRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly BLACK INK all information on this schedule. For assistance in completing this schedule, see instructors on the reverse s. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary eet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan sceeds and repayments, refunds, rebetes, returns of deposit, proceeds from sales, interest or other income) /ER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular rty committee).

Page 1 or	. 1

1	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMGUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED
	PLATINUM PROPERTIES, LLC 9551 DELEGATES ROW INDIANAPOLIS, IN 46240	Contributions:  XiOxrect In-Kind (describe)	\$500.00	\$500.00	4-22-00
		Other Receipts:  ☐ Interest ☐ Loan ☐ Misc (specify)			Treasurer
2,	BEAM, LONGEST & NEFF, LLC '8126 CASTLETON ROAD	Contributions:    Direct   (n-Kind (describe)	\$4,995.00	\$4,995.0	4-29-00
	INDIANAPOLIS" IN 46250	Other Receipts:			Treasurer
3.	COLE ASSOCIATES, INC. 2211 EAST JEFFERSON BLVD. SOUTH BEND, IN 46615	Contributions:  XXXect In-Kind (describe)	\$950.00	\$950.00	4-27-00
		Other Receipts: Interest Cloan Misc (specify)			Treasurer
1.	KITE DEVELOPMENT CORPORATION 6610 N. SHADECAND AVE. INDIANAPOLIS, IN 46220	Contributions:	\$350.00	\$350.00	5-4-00
		Other Receipts:  Interest I Loan Misc (specify)	17		Treasurer
5,	DLZ LABORTORIES, INC. 6121 HUNTLEY ROAD COLUMBUS, OH 43229	Contributions:	\$1,200.00	\$1,200.0	0 5-13-00
	. COLUMBUS, ON 43229	Other Receipts:  Interest © Loan Misc (specify)			reasuren
	SUB TOTAL TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A		<u>C</u>	
	(Enter total on ITEM 15a of the Summar		s		



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

### (CFA-4 SCHEDULE B) Itemized Expenditures

(4)	F	LE NUMBER	1
Page _	1	of 3	

RUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this use, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and entitles OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, far party committee). All cumulative expenses, including in-kind, regardless of amount paid to political titles (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) be itemized on this schedule.

CIPIENT'S NAME AND MAILING (street, number, city, state, ZI	P code)	RECIPIENT'S OCCUPATION FFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (the specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
POVERTISING VISI POSS N. MERIDIA POIANAPOLIS, IN	N-ST.		Offrect In-Kind Payment of Debt Returned Contribution Other Payment ADS	\$39216.32	\$56057.8	7 4-20-00
EDEA'S AT WORK RERRIMAN BLVD.	46060		Direct	\$121.15	\$702.66	4-11-00
JIM DANDY  S)NNER STREET  NOBCESVILLE, IN	46060	9	DINNER FOR	\$181.47	\$181.47	4-12-00
SHERI RUSHFORTH HANNABLE STREET NOBLESVILLE, IN	46060		CYOKect In-Gnd Payment of Dept Returned Contribution Other Purpose: SIGN DISTRIBUTION COST	\$500.00	\$500.00	4-12-00
POSTMASTER PLEASANT STREET NOBLESVILLE, IN	46060		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: POSTAGE	\$264.00	\$429.00	7-19-00
JEFF RUSHFORTH HANNABLE STREET NOBLESVILLE, IN	46060		At birect	\$600.00	\$600.00	5-1-00
de A   LONGEST & B126 CASTLETON RINDIANAPOLIS, IN	ROAD		Mixing In-Kind Payment of Debt Resumed Contribution Other Purpose: MAIL-OUT PIECE	\$2,249.99	9 \$2249.9	9 4-29-00
		SUB TOTAL TH	HIS PAGE OF SCHEDULE B	s		
		PAGES OF SCHEDULE B TEM 17a of the Summary	ON THE LAST PAGE ONLY Sheet)	s43132. <b>93</b>		



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# (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED
ADDRESS (street, number, city, state, ZIP code)	OK OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.  MCKNIGHT & QUANDT MANAGEMENT CO.  155 E: Market St., Ste 200  Indianapolis, IN 46204	Contributions:  ☑*Direct ☐ In-Kind (describe)	500.00	\$500.00	4-11-00
	Other Receipts:  ☐ Interest ☐ Loan ☐ Misc (specify)			
2.	Contributions:  Direct In-Kind (describe)	, all		
	Other Receipts: ☐ Interest ☐ Loan ☐ Misc (specify)			
3.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest I Loan Miso (specify)			
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan Misc (specify)			
5.	Contributions:    Direct   In-Kind (describe)			
	Other Receipts: ☐ Interest ☐ Loan ☐ Misc (specify)			
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TOTAL OF ALL PAGES OF SCHEDULE A ( Enter total on ITEM 15a of the Summary S		s		



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

### . (CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

#### Itemized Contributions and Other Receipts

TRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or tlegibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the nmary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a endar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative apts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, erest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (or \$200 if regular party committee).

FILE NUMBER				
Page	1	of1		

Contributions:   Contri	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED
Cimer Recipions:   Interest _ Lisan	NONE				
Cirrect   In-Kind (describe)					
Interest   Cantibutions:   Other Receipts					
Other Receipts:   Interest   Lean   Miss (specify)					
Interest					
Other Receipts:   Interest   Loan   Misc (specify)					
Contributions:    Direct   In-Kind (describe)    Other Receipts:   Interest   I can   Misc (specify)    SUB TOTAL THIS PAGE OF SCHEDULE A S - 0 -					
Other Raceipts: In-Kind (describe)  Other Raceipts: Interest I Loan Misc (specify)			.,	Æ	
SUB TOTAL THIS PAGE OF SCHEDULE A S - 0 -					
SUB TOTAL THIS PAGE OF SCHEDULE A S -0-	**				
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES Itemized Contributions and Other Receipts

TRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please or print legitly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the immary. Sheet, All cumulative contributions from political action committees OVER \$100 per contributor, and a calendar year MUST be itemized on this schedule (over \$200, if regular party committees). All transfers-and in-kind contributions regardless of the amount from political action committees MUST be itemized on is schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of posit, proceeds from sales, interest or other income). OVER \$100 per contributor, within a calendar year, UST be itemized on this schedule (over \$200 if regular party committee).

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Page	1	of	1	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED
HOME PAC P.O. BOX 44670	Contributions:  X Direct  In-Kind (describe)	\$3,000.00	\$3,000.0	4-19-00
INDIANAPOLIS, IN 46244	Other Receipts:  Interest Clean Misc (specify)			reasurer
	Contributions:    Direct   In-Kind (describe)			
	Other Receipts:			Xu.
1.	Contributions:    Direct   In-Kind (describe)			
	Other Receipts:  Interest Loan Misc (specify)			
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Cloan Misc (specify)			
5.	Contributions:    Direct   In-Kind (describe)			-
	Other Receipts:  ☐ Interest ☐ Loan ☐ Misc (specify)			
SUB,	TOTAL THIS PAGE OF SCHEDULE A	3,000.00	Mary State of	
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State Form 4605 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

#### Itemized Contributions and Other Receipts

TRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR GANIZATIONS, POLITICAL ACTION COMMITTIES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print by IN BLACK INK all Information on this schedule. For assistance in completing this schedule, see instructions on the reserved scient this schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary set. All cumulative contributions from other entitles OVER \$100 per contributor, within a calendar year MUST itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions ardless of the amount from candidate's, legislative caucus, and regular party committees MUST be itemized this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, IST be itemized on this schedule (over \$200 if regular party committee).

FI	ENUMBE	R	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED
CITIZENS FOR BETTER ROADS P.O. BOX 68123 INDIANAPOLIS, IN 46268	Contributions:  XXXX ect  In-Kind (describe)	\$500.00	\$500.00	4-11-00
	Other Receipts:			reasurer
E.D.I.S. 735 NORTH LYNHURST DRIVE INDIANAPOLIS, IN 46224	Contributions:  XX(rect	\$250.00	\$250.00	4-26-00
1ND1ANAFOL13, 1N 40224	Other Receiots:  Interest TLcan Misc (specify)	Q230.00	2200.00	Treasure
	Contributions:    Direct   In-Kind (describe)			
	Other Receipts:			
	Contributions:    Direct   In-Kind (describe)			
	Other Receipts:	11		
	Contributions:    Direct   In-Kind (describe)			
et .	Other Receipts:  Interest Cluan Misc (specify)			
OUR WORLL T	HIS DAGE OF SOURDING	5756	<b>型从收货补收</b> 给	
TOTAL OF ALL PAGES OF SCHEDULE A	ON THE LAST PAGE ONLY	\$750.00		
(Enter total on ITEM 15a of the Summary		s		



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE B) Itemized Expenditures

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Page	2	of	3	

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet.All cumulative expenses paid to individuals, businesses, labor organizations and other entitles OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION  OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
JUDY DILLINGER 19905 Wagon Trail Dr. Noblesville, IN 46060		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	\$33.00	\$33.00	5-3-00
NODIESVIIIE, IN 40000		Copies for Handout			
Nobles Elks Lodge South 9th STreet		ÖDirect ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other	\$387.00	\$387.00	5-3-00
Noblesville, IN 46060		Purpose: Victory Party	\$307.00	\$307.00	5-5 00
Get Results, Inc.		Direct In-Kind Payment of Dept Returned Contribution Other			
P.O. Box 3312 Carmel, IN 46032		Purpose: Campaign Help	\$630.00	\$2057.20	5-4-00
Code A Metrobank		☐ Direct ☐ In-Kind ☐ Payment of Deot ☐ Returned Contribution ☐ Other			
North 9th Street Noblesville, IN 46060		Purpose:	\$1260.00	\$1260.00	5-16-00
Code A BOYS & Girls Club of Noblesville		Direct	\$399.00	\$399.00	6-13-00
Conner Street Noblesville, IN 46060		Purpose: Donation Ad			
Code F  Kathy Richardson for 29th District		Direct		byvalence ingrig	
State Rep. Noblesville, IN 46060		Purpose;	\$250.00	\$250.00	5-21-00
Noblesville Football		Direct ☐ In-Kind     Payment of Debt     Returned Contribution     Other			
Allisonville Road Noblesville, IN 46060		Purpose:	\$100.00	\$100.00	7-12-00
	SUB TOTAL THI	IS PAGE OF SCHEDULE B	\$3059.00	A) Talk	
TOTAL OF ALI (Enter total on	L PAGES OF SCHEDULE B O ITEM 17a of the Summary Si	IN THE LAST PAGE ONLY	s		



State Form 4505 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

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## (CFA-4 SCHEDULE B) Itemized Expenditures

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Page _	3	of	3	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION TYPE OF EXPENDITURE and OFFICE SOUGHT (if applicable) PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Dan Stevens for Sheriff Committee Westfield, IN 46074	Direct   In-Kind   Payment of Debt   Returned Contribution   Other	\$1000.00	\$1000.00	7-18-00
Standard Management & Charitable Trust Keystone Crossing Indianapolis, IN	# Direct	\$500.00	\$500.00	7-26-00
Republican Party North 8th Street Noblesville, IN 46060	Purpose: Elephant Open Donation	\$90.00	\$ 90.00	7-7-00
Amsterdam Printing New York City, NY	EDirect In-Kind Payment of Deat Returned Contribution Other Purpose: Promotional Pins	\$207171	\$207.71	9-16-00
Noblesville High School Alumni Banquet Noblesville, IN 46060	ÉDirect In-Kind Payment of Debt Returned Contribution Other Purpose: Banquet	\$ 25.00	\$ 25.00	4-30-00
Beam Longest & Neff, LLC. 8126 Castleton Road Indianapolis, IN 46250	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Mailings	\$4995.00	\$4995.00	4-29-00
ade	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:			
	SUB TOTAL THIS PAGE OF SCHEDULE B	\$6817.71		
	L PAGES OF SCHEDULE B ON THE LAST PAGE ONLY ITEM 17a of the Summary Sheet)	53009 64		



State Form 4608 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES

For Public Questions

		FILENUMB	ER	
Page	1	of	1	

VSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this medule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid political committees supporting or opposing a public question, MUST be ifemized on this schedule.

	FU	BLIC QUESTION INFORMATION			
nter Text of Public Question					
Orac of Overelless C. Statuside C. L.					
Type of Question: Statewide Lo Position: Supported Opposed			1		
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF EXPENDITURE	PURPOSE OF EXPENDITURE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATEOF EXPENDITURE
NONE	Direct				
	□In-Kind	*			
	□ Direct				
	□ in-Kind	Eq.			
	□ Direct				***
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144	□ In-Kind				
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	st	JB TOTAL THIS PAGE OF SCHEDULE C	2-0-		
TOTAL OF (Enter total	ALL PAGES OF So on ITEM 17a of th	CHEDULE C ON THE LAST PAGE ONLY to Summary Sheet)	s-0-		



State Form 4806 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

## (CFA-4 SCHEDULE D) Debts Owed by This Committee

FILE NUMBER						
Page	1	of	1			

TRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this edue, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWED BY the mrittee during the reporting period. Include all amounts owed for or to lenning institutions, individuals, dit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the re-of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes as of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS. (street, number, city, state, ZIF code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMQUINT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	GUTSTANDING BALANCE THIS PERIOD
NONE ,					
OERS OCCUPATION:					
IDERS OCCUPATION:					
NOERS OCCUPATION					
NOERS OCCUPATION					
		34			
PAGERS OCCUPATION:					1
			1		
			11		
ENDERS OCCUPATION:					
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WAS THE COMPANY OF THE PARTY.	1				
SUB TOTAL THIS PAGE OF SCHEDULE D					s - <u>0</u> -
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)					s -0-



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

## (CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

FILE NUMBER					
Page	1	of	1		

RUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing chedule, see instructions on the reverse side. List all debts, loans, regardless of amount, OWED TO the mittee during the reporting period. Include all amounts the committee has loaned to others.

RROWER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP cade)	CO-SIGNER'S NAME AND MAILING ADDRESS(if any)	<b>ORIGINAL AMOUNT</b>	INCURRED	CUMULATIVE PAID	BALANCE THIS PERIOD
	(street, number, city state, ZIP code)	NATURE OF DEBT		YEAR-TO-DATE	PERIOD
NONE					
NONE	-		1		
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SUB TOTAL THIS PAGE OF SCHEDULE E					s0-
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY					s -0-
(Enter total on ITEM 20 of the Summary Sheet)					